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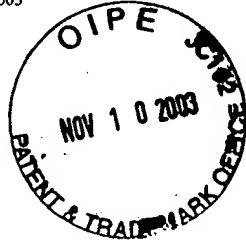
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23492 7590 07/29/2003

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 ABBOTT PARK, IL 60064-6008



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Wanda E. Smith (Depositor's name)
 (Signature)
 November , 2003 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/954,936 09/18/2001 Clark A. Briggs 6017.US.D1 9361

TITLE OF INVENTION: VARIANT HUMAN ALPHA7 ACETYLCHOLINE RECEPTOR SUBUNIT, AND METHODS OF PRODUCTION AND USE THEREOF

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional NO \$1300 \$300 \$1600 10/29/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
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GUCKER, STEPHEN 1647 530-350000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Mimi C. Goller
 2
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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ABBOTT LABORATORIES

ABBOTT PARK, IL 60064-6008

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☐ corporation or other private group entity ☐ government

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(Authorized Signature) _____ (Date)

Mimi C. Goller, Reg. No. 39,046 Nov. 5, 2003

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